OUTPATIENT REHAB AGENCY REIMBURSMENT

Effective July 1, 2014, Outpatient Rehabilitation Agencies will be reimbursed based on the DMAS agency fee schedule listed below:

Revenue Code prior to and on June 30, 2009	Procedure Code effective on and after July 1, 2009	Procedure Code Description	DMAS Fee Schedule Amount effective July 1, 2014
0421	97110	Therapeutic procedure (PT), each 15 min. Note : unit = 15 minutes	\$25.97
0423	97150	Therapeutic procedure(s) (PT), group Note : unit = a group session	\$16.46
0424	97001	Physical therapy evaluation Note : unit = an evaluation	\$66.21
0431	97530	Therapeutic activities (OT), each 15 min Note : unit = 15 minutes	\$27.44
0433	S9129	Therapeutic procedure(s) (OT), group Note : unit = a group session	\$16.46
0434	97003	Occupational therapy evaluation Note : unit = an evaluation	\$70.97
0441	92507	Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual Note: unit = one treatment session	\$60.35
0443	92508	Treatment of speech, language, voice, communication, and/or auditory processing disorder; group (2 or more individuals) Note: unit = one treatment session	\$28.17
0444	92506	Evaluation of speech, language, voice, communication, and/or auditory processing Note: unit = an evaluation	\$140.46